

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 01 / 22 / 2016</div>	

Full Name of Payee 76 Words		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 01 / 21 / 2016</div>	
Mailing Address 1806 Vernon St, NW #100		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">4000.00</div>	
City Washington	State DC	Zip Code 20009	Transaction ID : B592912
Purpose of Expenditure Production of online advertisement		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 01 / 21 / 2016</div>
Name of Federal Candidate Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">59589.34</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► Democratic Primary

Full Name of Payee Screen Strategies Media		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 01 / 21 / 2016</div>	
Mailing Address 11150 Fairfax Blvd, Ste 550		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">55589.34</div>	
City Fairfax	State VA	Zip Code 22030	Transaction ID : B592913
Purpose of Expenditure Online advertising media buy. Correction to amount previously reported on 1/22/16		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">MM / DD / YYYY 01 / 21 / 2016</div>
Name of Federal Candidate Hillary Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">59589.34</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► Democratic Primary

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">59589.34</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ►	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">59589.34</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling

[Electronically Filed]

Date

MM / DD / YYYY
01 / 29 / 2016

Signature